EFS Web Receipt date: 10/19/2005 — 20-05 10799842 - GAU: 3763

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PTO/SB/21 (09-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/799,842-Conf. #8505
Filing Date	March 13, 2004
First Named Inventor	Gale White
Art Unit	3763
Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	
Attorney Docket Number	17127/002004

ENCLOSURES (*Check all that apply*)

- [] Fee Transmittal Form
- [] Fee Attached
- [] Amendment/Reply
- [] After Final
- [] Affidavits/declaration(s)
- [] Extension of Time Request
- [] Express Abandonment Request
- [x] Information Disclosure Statement
- [] Certified Copy of Priority Document(s)
- [] Reply to Missing Parts/ Incomplete Application
- [] Reply to Missing Parts under 37 CFR 1.52 or 1.53
- [] Drawing(s)
- [] Licensing-related Papers
- [] Petition
- [] Petition to Convert to a Provisional Application
- [] Power of Attorney, Revocation Change of Correspondence Address
- [] Terminal Disclaimer
- [] Request for Refund
- [] CD, Number of CD(s) _____
- [] Landscape Table on CD
- [] After Allowance Communication to TC
- [] Appeal Communication to Board of Appeals and Interferences
- [] Appeal Communication to TC **(Appeal Notice, Brief, Reply Brief)**
- [] Proprietary Information
- [] Status Letter
- [x] Other Enclosure(s) (please Identify below):

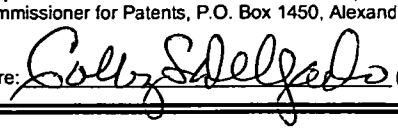
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	OSHA · LIANG LLP		
Signature			
Printed name	John W. Montgomery		
Date	October 19, 2005	Reg. No.	31,124

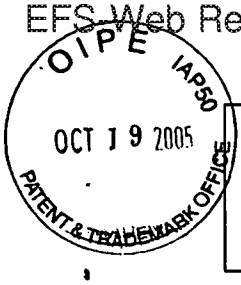
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Dated: October 19, 2005 Signature:  (Colby S. Delgado)

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EFS-Web Receipt date: 10/19/2005 10799842 - GAU: 3763



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Dated: October 19, 2005 Signature: (Colby S. Delgado)

Docket No.: 17127/002004
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Gale White et al.

Application No.: 10/799,842 Confirmation No.: 8505

Filed: March 13, 2004 Art Unit: 3763

For: PATIENT MEDICATION IV DELIVERY PUMP WITH WIRELESS COMMUNICATION TO A HOSPITAL INFORMATION MANAGEMENT SYSTEM

Examiner: Not Yet Assigned

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR 1.97, Applicant(s) hereby make of record the following additional documents. A PTO Form SB/08 accompanies this statement.

This Information Disclosure Statement is filed before the mailing date of a first Office Action on the merits as far as is known to the undersigned (37 CFR 1.97(b)(3)). In the event that an Office Action has been mailed, Applicants hereby request that the fee under 37 CFR 1.97(c)(2) for consideration after the first Office Action be paid pursuant to the deposit account authorization below.

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that

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such document is prior art. Moreover, Applicant(s) understand(s) the Examiner will make an independent evaluation of the cited documents.

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0591, under Order No. 17127/002004.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 50-0591, under Order No. 17127/002004 from which the undersigned is authorized to draw.

Dated: October 19, 2005

Respectfully submitted,

By _____

John W. Montgomery
Registration No. 31,124
OSHA · LIANG LLP
1221 McKinney St., Suite 2800
Houston, Texas 77010
(713) 228-8600
(713) 228-8778 (Fax)

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Substitute for form 1449A/B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 1

Complete if Known	
Application Number	10/799,842-Conf. #8505
Filing Date	March 13, 2004
First Named Inventor	Gale White
Art Unit	3763
Examiner Name	Not Yet Assigned
Attorney Docket Number	17127/002004

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.[1]	Document Number Number-Kind Code[2] (*if known*)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA*	US-5,594,786-A	01-14-1997	Chaco et al.	
	AB*	US-5,582,593-A	12-10-1996	Hultman	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No.[1]	Foreign Patent Document Country Code[3]-Number[4]-Kind Code[5] (*if known*)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T[6]

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. * CITE NO.: Those application(s) which are marked with an single asterisk (*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. [1] Applicant's unique citation designation number (optional). [2] See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. [3] Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). [4] For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. [5] Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. [6] Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.[1]	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T[2]

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

[1]Applicant's unique citation designation number (optional). [2]Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature	/Manuel Mendez/	Date Considered	07/17/2008

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Application No. (if known): 10/799,842 Attorney Docket No.: 17127/002004

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on October 19, 2005
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Colby S. Delgado
Typed or printed name of person signing Certificate

Registration Number, if applicable

(713) 228-8600
Telephone Number

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IDS (Citation) by Applicant (2 References) (1 page)
Supplemental Information Disclosure Statement (2 pages)
Transmittal (1 page)

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INFORMATION DISCLOSURE STATEMENT (IDS) CHECKLIST

OIPE IAP50 OCT 19 2005 PATENT & TRADEMARK OFFICE

Client/Matter Number: 17127/002004
Client/Matter Name: B. Braun Medical, Inc.
PATIENT MEDICATION IV DELIVERY PUMP WITH WIRELESS COMMUNICATION TO A HOSPITAL INFORMATION MANAGEMENT SYSTEM

IPDAS(Mandatory)

☐ IDS Transmittal ☐ IDS Citation by Applicant ☐ Postcard

IPDAS(As Needed)

☐ Fee Transmittal ☐ Check Request/Credit Card Authorization Form ☐

APPLICATION FILE

☒ Reminder letters (at least two) have been sent to client advising of duty to disclose. 2/29/04 7/15/04

☒ Any articles, patents and/or applications referred to in the specification are included.

☒ Prior Art folder, Work Copies folder and file have been reviewed for additional prior art.

N/A Concise explanation of relevance, translation, or foreign search report is included if IDS cites non-English references. Abstract translations **do not qualify.**

N/A If prior art resulted from a foreign search report, the foreign search report is included and referenced on the transmittal.

N/A Check/Credit Card Authorization Form for application fee is included. Amount: _____

☒ Express mail certificates of mailing are signed, and dated

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☒ Cael 10-19-05
Assistant Date

WA IDS filing package is substantively correct, complete, and complies with all client instructions.
(WA Initials)

AL I have reviewed and approved the filing.
(AL Initials)

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